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FEC FORM 2 STATEMENT OF CANDIDACY

2005 AUG 23 A 10: 45

| James Matheson | | |
|--|---|--|
| (b) Address (number and street) | 2. Identification Number | |
| P O P 以 541048 | 3. Is This Rest New group Amended | |
| " Salt Lake City UT 891527048 | Statement (N) OR (A) | |
| 4. Party Affiliation 5. Office Sought 6. State & Dis | strict of Candidate | |
| Democrat UTAH 02 | | |
| DESIGNATION OF PRINCIPAL CAMPAIGN COMMITTEE | | |
| 7. I hereby designate the following named political committee as my Principal Campaign Com | nmittee for the <u>400 0</u> election(s). (year of election) | |
| NOTE: This designation should be filed with the appropriate office listed in the instructions. | | |
| (a) Name of Committee (in full) | . | |
| MATHESON FOR CONGRESS | INC | |
| (b) Address (number and street) | | |
| POBX 521048 | | |
| (c) City, State, and ZIP Code | | |
| Salt Lake City UT 84152-10 | ત્રાહ | |
| 2004 CALLO CITY OI RAIDITIO | 78 | |
| DESIGNATION OF OTHER AUTHORIZED | COMMITTEES | |
| (including Joint Fundralsing Representati | | |
| I hereby authorize the following named committee, which is NOT my principal campaign co- candidacy. | ommittee, to receive and expend funds on behalf of my | |
| the state of the s | | |
| NOTE: This designation should be filed with the principal campaign committee. | | |
| | <u> </u> | |
| (a) Name of Committee (in full) | | |
| (a) Name of Committee (in full) | | |
| (a) Name of Committee (in full) (b) Address (number and street) | | |
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| (b) Address (number and street) | • | |
| (b) Address (number and street) (c) City, State, and ZIP Code | | |
| (b) Address (number and street) (c) City, State, and ZIP Code DECLARATION OF INTENT TO EXPEND PERSONAL FI | UNDS (House or Senate Only) | |
| (b) Address (number and street) (c) City, State, and ZIP Code DECLARATION OF INTENT TO EXPEND PERSONAL FIg. 1 intend to expend personal funds exceeding the threshold amount (see 11 C.F.R. 400.9) by | UNDS (House or Senate Only) | |
| (b) Address (number and street) (c) City, State, and ZIP Code DECLARATION OF INTENT TO EXPEND PERSONAL FIg. 1 intend to expend personal funds exceeding the threshold amount (see 11 C.F.R. 400.9) by | UNDS (House or Senate Only) | |
| (b) Address (number and street) (c) City, State, and ZIP Code DECLARATION OF INTENT TO EXPEND PERSONAL FI 9. I intend to expend personal funds exceeding the threshold amount (see 11 C.F.R. 400.9) b | UNDS (House or Senate Only) y for the primary election, and | |
| (b) Address (number and street) (c) City, State, and ZIP Code DECLARATION OF INTENT TO EXPEND PERSONAL FI 9. I intend to expend personal funds exceeding the threshold amount (see 11 C.F.R. 400.9) b 9A 0000 | UNDS (House or Senate Only) y for the primary election, and for the general election. | |
| (c) City, State, and ZIP Code DECLARATION OF INTENT TO EXPEND PERSONAL F 9. I intend to expend personal funds exceeding the threshold amount (see 11 C.F.R. 400.9) b 9A 9B If you do not intend to expend personal funds exceeding the threshold amount for either elements. | UNDS (House or Senate Only) for the primary election, and for the general election. lection, you must enter "0.00" for each. | |
| (c) City, State, and ZIP Code DECLARATION OF INTENT TO EXPEND PERSONAL F 9. I intend to expend personal funds exceeding the threshold amount (see 11 C.F.R. 400.9) b 9A OCC 9B If you do not intend to expend personal funds exceeding the threshold amount for either elements of the control of the contro | UNDS (House or Senate Only) for the primary election, and for the general election. lection, you must enter *0.00" for each. and belief it is true, correct and complete. | |
| (c) City, State, and ZIP Code DECLARATION OF INTENT TO EXPEND PERSONAL F 9. I intend to expend personal funds exceeding the threshold amount (see 11 C.F.R. 400.9) b 9A 9B If you do not intend to expend personal funds exceeding the threshold amount for either elements. | UNDS (House or Senate Only) for the primary election, and for the general election. lection, you must enter "0.00" for each. | |
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| Federal Election Commission | | |
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| ENVELOPE REPLACEMENT PAGE FOR INCOMING DOCUMENTS The FEC added this page to the end of this filing to indicate how it was received. | | |
| | Date of Receipt | |
| Hand Delivered | , | |
| | Postmarked | |
| USPS First Class Mail | 8/10/05 | |
| LIODO De standardo de Send | Postmarked (R/C) | |
| USPS Registered/Certified | | |
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| Delivery Confirmation™ or Signature Confirmation™ Label | | |
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| | Shipping Date | |
| Overnight Delivery Service (Specify): | 7 | |
| Next B | Susiness Day Delivery | |
| | Date of Receipt | |
| Received from House Records & Registration Office | | |
| | Date of Receipt | |
| Received from Senate Public Records Office | | |
| | Date of Receipt | |
| Received from Electronic Filing Office | | |
| 1 | te of Receipt or Postmarked | |
| Other (Specify): | | |
| C | 8/23/05 | |
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| PREPARER | DATE PREPARED | |
| (3/2005) | | |